Brookhaven National Laboratory/ Photon Sciences Directorate					
Subject:	**PS CR Emergency Response Roster (Course Code PS-CR-BOTH-ER-001)**				
Number:	PS-TRN-CRF-0027	**Revision:** C	**Effective:**	10/22/2012	**Page** 1 **of** 2

Prepared and Approved By:	Mary Anne Corwin		

*Approval signatures on file with master copy.

Revision Log

Instructor:	Bob Chmiel

Attendees:

	Last Name (print)	First Name (print)	Life/Guest Number	Signature
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Instructor signature certifies attendance and satisfactory completion of course:

Instructor's signature: _____   Date _____

For record entry into BTMS return copy to: Mary Anne Corwin, Bldg. 725D

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Document Review Frequency	
3	Years

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PHOTON SCIENCES DIRECTORATE Revision Log		
Document Number:	PS-TRN-CRF-0027	
Subject	PS CR Emergency Response Roster (Course Code PS-CR-BOTH-ER-001)	
Rev	**Description**	**Date**
A	Initial document.	12-19-2011
B	Changed course name and course code.	05-23-2012
C	Changed course name and course code.	10-22-2012